

| POSITION                  | INITIALS     | ID NO.       | DATE            |
|---------------------------|--------------|--------------|-----------------|
| FEE DETERMINATION         | <i>meron</i> | <i>20</i>    | <i>06-01-01</i> |
| O.I.P.E. CLASSIFIER       |              | <i>30864</i> | <i>6/19</i>     |
| FORMALITY REVIEW          | <i>sm</i>    |              | <i>7/26/01</i>  |
| RESPONSE FORMALITY REVIEW |              |              |                 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim             | Date |
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| Claim             | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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901  
 7/26/01